PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I

Application or Docket Number

10632189

CLAIMS AS FILED - PART I						-)		SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS			(Column 1)		(Column 2)		TY	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			22					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			22 minus 20=		* 2			X\$ 9=		OR	X\$18=	36
INDEPENDENT CLAIMS			3 minus 3 =		*			X42=		OR	X84=	4
MULTIPLE DEPENDENT CLAIM PRESENT								+140=	;	OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	L _	ΓΟΤΑL		OR	TOTAL	78G
CLAIMS AS AMENDED - PART II											OTHER	THAN
10	(Column 1) (Colum					(Column 3)	_	SMALL E	NTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	F CL AINA	=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
	· .							TOTAL DIT. FEE		OR	TOTAL	
4	(Column 1) (Column 2) (Column 3)										ADDIT. FEE	
[CLAIMS		HIGH	IEST	(Column 3)		1	ADDI-	1 1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
				L	TOTAL			TOTAL				
		_					AD	DIT. FEE	<u> </u>	Un	ADDIT. FEE	
_		(Column 1) CLAIMS		(Colu		(Column 3)	l					
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+140=		OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write '0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
	The "Highest Nur	mber Previously Pa	id For" (Total o	r Independ	lent) is the	and, enter 3. e highest numbe	r found	d in the app	oropriate bo	x in co	lumn 1.	